# ANNUAL REPORT

on the

# SANITARY CONDITIONS

of the

## STOWMARKET URBAN DISTRICT.

#### GENTLEMEN.

I beg to furnish the Annual Report for the year ending 31st December, 1943.

Area ... 1668 aores.
Population ... 6898
Inhabited Houses ... 2100
Rateable Value ... £37,341
Sum raised by 1d. rate ... £159

#### STATISTICS.

BIRTHS Legitimate Illegitimate	M F <u>Total</u> 52 48 100 7 3 <u>10</u> 110	Rate per 1000 population 15.9 (Rate for England 16.5)
STILLBIRTHS	Nil .	
DEATHS. All causes	34 39 70	Rate per 1000 population 10.1 (Rate for England 12.1)
Infant mortality (under 1 year Legitimate	1	Rate per 1000 live births 9.1 (Rate for England 49)

#### INFECTIOUS DISEASES.

	Ages	0	1 3	<u>⊳ 5</u>	10 15	25 Total
Scarlet Fever Measles Whooping Cough Diphtheria	n' -	- · · · 1 4 	1 -12 5	3 17 24 58 5	1	27 106 14
•	Ages	0.	5 15	45	65	;
Erysipelas Pneumonia	•	<u> </u>	1	3 , 2	1 2	6 5
		· ·	<u>.</u> ;		<b>5</b>	159

The above age classification is in accordance with the new list for 1944.

One case of infectious hepatitis (Jaundice) was notified, this is only. notifiable in the Eastern region for research into incidence. All figures are within normal limits, except measles, which was specially prevalent from May to August, ceasing abruptly in the latter month.

Infectious disease incidence - 23 per 1000.

## TUBERCULOSIS.

5 new cases were notified, all pulmonary males, ages 25, 27, 34, 35 and 44. 2 deaths occurred, both pulmonary males, ages 27 and 63. 17 cases remained on the register at the end of the year. Two of the notifications were Irish labourers, who have returned to Ireland.

Notification of all Infectious diseases is satisfactory.

CAUSES OF DEATH.

	M	F		M	F
Diphtheria	1		Apoplexy	3	1
Tuberculosis	2		Heart disease	6	13
Syphilis	1		Bronchitis	2	5
Influenza	· 2·	1 '	Pheumonia	2	1
Cancer:			Other respiratory		1
Uterus	*	1	Ulcer of stomach		1
Stomach	. 1	2	Other digestive	1	
Breast	r endir	3	Road traffic	1	4
Other sites	7	3	Other causes	. 2	6
Diabetes	·	1			

The diphtheria death above mentioned was in hospital with pneumonia and was not the case notified as such in the previous table.

## GENERAL STATEMENT.

Diphtheria inoculation proceeds satisfactorily. The estimated percentage of children under five done is 86 and of the children of school age 85.

Water

All samples have been satisfactory and have been submitted to me.

Sewerage.
This still remains inadequate but steps are being taken to advance the construction of the new works.

Housing.

Many houses are degenerating and more will have to be added to future programmes if the standard is to be kept up. Rat infestation has occurred in the year and verminous states are not unknown.

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The waiting list for houses is very long and unhealthy conditions exist even where statutory overcrowding is not provable.

Scabies.

This is becoming less. Some resistant cases were supplied with remedies at the cost of the Council where private treatment either had not been carried out or was not asked for by the individual.

One carrier of diphtheria occurred but after prolonged treatment was freed without spread to others.

# REPORT OF THE ACTING SANITARY INSPECTOR.

1. GENERAL. The Ministry of Health has stated that many items which usually appear in Annual Reports may be omitted entirely, and those which should be retained may be dealt with as briefly as possible. This is good advice in difficult times, for shortage of man-power and materials has made Sanitary Work arduous.

With many other important duties to perform, I have found time only to deal with that part of the work which cannot be neglected. Much, therefore, remains to be done when your Sanitary Inspector returns from H.M.Forces, and it is hoped that this will coincide with the release of labour and materials so necessary for the improvement of a great number of working class/houses.

2. WATER. Frequent samples are taken from the Town and Combs Works and in no case has the County Bacteriologist rendered an adverse report. The water was of high purity even before the compulsory introduction of chlorination.

The gradual growth of the town, coupled with the improved hygical standards of most people, is, however, rapidly rendering both Waterworks too small for the output demanded, and any sudden increase in population or large scale building operations will inevitably call for improved pumping and filtering facilities.

3. SEWERAGE I cannot do better than quote from an old Report: "The system is defintely lacking in efficiency and is out of date." Brevity combined with fact.

It is, however, pleasing to record that your Consulting Engineer is now actively engaged in the preparation of plans for the modernisation of the system.

2.

4. HOUSING. In common with most other towns the housing shortage in Stowmarket is acute, and it is hoped to build 70 houses, as a first instalment, as soon as Ministerial sanction is obtained. Forty houses are scheduled for demolition or closing as soon as circumstances permit and a similar number will be included in a second programme.

After four years of war a large number of the low rented houses are now sub-standard due to the inability of owners to get builders to carry out repairs, and there are, of course, a few owners who rather

welcome the shortage of labour and building materials.

Herein lies a lot of post-war work for your Sanitary Inspector.

5. FOODSTUFFS. On the instructions of the Ministry of Health, Milk Inspector frequent samples of pasteurised milk have been taken for examination and they have always passed the required test. Since the centralisation of slaughtering meat inspection has been simplified, but the quantity has been considerably increased owing to many rural shops taking their supplies from this town. Bakehouses in the town maintain a reasonably high standard.

H. PEDLER.

Medical Officer of Health.

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